PATENT APPLICATIO TEE DETERMINATION RECO								nd 09/763528					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALLE TYPE [NTITY	OR	OTHER		
TOTAL CLAIMS					d d	F		RATE	FEE	1	RATE	FEĘ,	
FC)R		NUMBER	FILED	NUMBER EXTRA			BASIC FEE		UR	BASIC FEE	87.0	
TC	TAL CHARGE	ABLE CLAIMS	minus 20=		•			X\$ 9=		OR	X\$18=		
INC	DEPENDENT C	LAIMS	minus 3 =					X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT										1		•	
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=	<u> </u>	OR	+270=	S/5 (5)	
								TOTAL	L	OR	TOTAL	XX C	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column							SMALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER XUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total -	•	Minus	••		=	ſ	X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	•••		=	ſ	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ı	+135=		OR	+270=		
								TOTAL			TOTAL		
		(Column 3)	A	ADDIT. FEE		JO. 1	ADDIT. FEE						
8		(Column 1)	90 91 34	(Colun	EST		Γ	1	ADDI-			ADDI-	
AMENDMENT I		REMAINING AFTER AMENDMENT	44	PREVIO PAID	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE [*]	TIONAL FEE	
	Total	•	Minus	••		=	ſ	X\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	•••		=	Ī	X40=		OR	X80=	;	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+135=		OR	+270=		
							L.	TOTAL		י בו	TOTAL		
			(Colum		2) (Column 2)		DOIT. FEE	, ·	JO.,	ADDIT. FEE			
	enhance strong	CLAIMS CLAIMS		(Colur HIGH	EST	(Column 3)	Г		ADDI-	. (ADDI-	
AMENDMENT C	of the same	REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	•	Minus	••		=	ľ	X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	•••		2	ŀ	X40=		OR	X80=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ	+135=	·				
	1. If the policy in column 1 is long than the only in column 2 write "0" in column 2									OR	+270=		
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE													
		mber Previously Pa hber Previously Pai					four	nd in the apr	propriate bo	x in col	lumn 1.		